



## SENIOR & LONG TERM CARE DIVISION COMMUNITY SERVICES BUREAU

### MEDICAID HOSPICE POLICY MANUAL

**Section: ELIGIBILITY FOR SERVICES**

**Subject: Medicaid Hospice  
Certification of Terminal Illness**

**Reference: ARM 37.40.808; 42 CFR 418.22**

### **CERTIFICATION OF TERMINAL ILLNESS**

Hospice providers must obtain written certification of terminal illness for each hospice benefit election period.

Certification must be obtained even if a single election continues in effect for an unlimited number of periods.

The hospice must obtain the written certification before it submits a claim for payment except in the following circumstances:

1. If the hospice cannot obtain the written certification within two calendar days, after a period begins, it must obtain an oral certification within two calendar days and the written certification before it submits a claim for payment.
2. Certifications may not be completed more than fifteen calendar days prior to the effective date of hospice election.
3. Recertification may not be completed more than fifteen calendar days prior to the subsequent benefit period.

### **FACE-TO-FACE ENCOUNTERS**

Hospice physicians must have a face-to-face encounter with each hospice member whose total stay across all hospices is anticipated to reach the third benefit period. The face-to-face encounter must occur prior to, but no more than 30 calendar days prior to:

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1. Third benefit period recertification, and
2. Every benefit period recertification thereafter.

The face-to-face encounter will be used to gather clinical findings to determine continued eligibility for hospice care.

**CONTENT**  
**OF**  
**CERTIFICATION**

Certification will be based on the attending physician's or medical director's clinical judgement regarding the normal course of the member's illness. The certification must conform to the following:

1. The certification must specify that the member's prognosis is for a life expectancy of six months or less if the illness runs its normal course;
2. Clinical information and other documentation that supports the medical prognosis must accompany the certification and must be filed in the medical record with the certification;

**NOTE:** Initially the clinical information must be provided verbally, and must be documented in the medical record and included as part of the hospice's eligibility assessment.

3. The physician must include a brief narrative explanation of the clinical findings that supports a life expectancy of six months or less as part of the certification and recertification forms, or as an addendum to the certification and recertification forms:
  - a. If the narrative is part of the certification or recertification form, then the narrative

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must be located immediately prior to the physician's signature;

- b. If the narrative exists as an addendum to the certification or recertification form, in addition to the physician's signature on the certification or recertification form, the physician must also sign immediately following the narrative in the addendum;
  - c. The narrative shall include a statement directly above the physician's signature attesting that by signing, the physician confirms that the physician composed the narrative based on his/her review of the member's medical record or, if applicable, the physician's examination of the member;
  - d. The narrative must reflect the member's clinical circumstances and cannot contain check boxes or standard language used for all members; and
  - e. The narrative associated with the third benefit period recertification and every subsequent recertification must include an explanation of why the clinical findings of the face-to-face encounter support a life expectancy of 6 months or less.
4. The physician who performs the face-to-face encounter with the member must attest in writing that he or she has a face-to-face encounter with the member, including the date of the visit;

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The attestation of the non-certifying hospice physician shall state that the clinical findings of that visit were provided to the certifying physician for use in determining continued eligibility for hospice care; and

5. All certifications and recertifications must be signed and dated by the physician(s), and must include the benefit period dates to which the certification or recertification applies.

### **SOURCES OF CERTIFICATIONS**

For the initial 90-day period, the hospice must obtain written certification statements (and oral certification statements if required) from:

1. The medical director of the hospice or the physician member of the hospice interdisciplinary group; and
2. The member's attending physician, if the member has an attending physician. The attending physician must meet the definition of physician specified in 37.40.801, (Refer to Hospice Policy 003).

For subsequent periods, the only requirement for certification is by one of the physicians specified in the above sections.

### **MAINTENANCE OF RECORD**

Hospice staff must:

1. Make an appropriate entry in the member's medical record as soon as they receive an oral certification; and
2. File written certifications in the medical record.